Program Accountability: Adult Meal Service within the CACFP

Guidance for Institutions Participating in the Child and Adult Care Food Program (CACFP)



















Training Topics

- × Adult Meal Pattern
- Components
- Meal Service within CACFP
- Claiming Meals
- x Recordkeeping















































Adults Meal Pattern: Components



























Milk Component











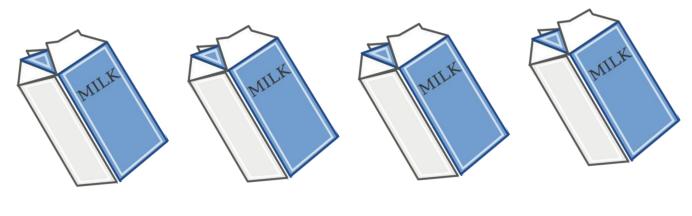


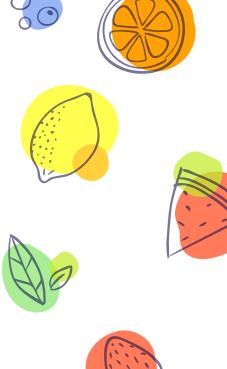




Requirements

- × 8 Fluid ounces
 - Unflavored low-fat (1%)
 - Unflavored fat free (skim)
 - Flavored fat free (skim)









Milk Substitutions



Allowed for non-disability medical or special dietary need



Medical statement is not required if nutritionally equivalent to cow's milk



Request must be made in writing



"Medical statement required when a disability requires a non-dairy beverage that is not nutritionally equivalent to cow's milk..."





























Meat/Meat Alternate Component





























































MMA at Breakfast

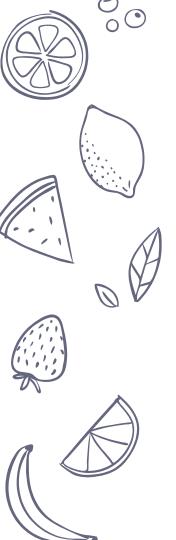
A meat/meat alternate may be served in place of the grains component a maximum of 3 times per week

Menu Example:

- Cheese Omelet (Credits as the M/MA)
- Fruit
- Milk

Increases variety in the menus





Crediting Guidelines

Serving M/MA in place of grains:

 1 oz. of M/MA credits as 1 serving of grains

Example: adults & 1 oz. cheddar cheese



Tofu and Soy Products

What is Tofu?

Credit as a M/MA for child & adult meals

Does not credit toward reimbursable meals for infants



Tofu C. E. F.

- C Commercially prepared
- E as meat substitue
- Five Grams of Protein



Commercially Prepared

Must be commercially prepared tofu & soy yogurt

Non-commercial or nonstandardized are not creditable

• e.g. homemade tofu



Easily Recognized As Meat Substitute

Creditable

Tofu links and tofu sausages

Tofu pieces in a salad

Tofu cubes in a stir fry

Tofu omelets

Tofu miso soup

Not Creditable

Tofu noodles: Mimics a grain component

Smoothies with soft or silken tofu: Adds texture

Baked desserts with soft or silken tofu: Adds texture











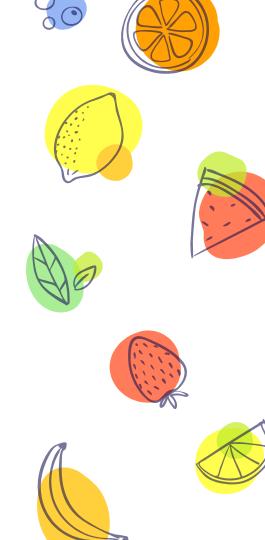


Five Grams of Protein

Must contain 5 grams of protein per 2.2 ounces (½ cup) by weight

Locating products

- Nutrition Facts Label
- Child Nutrition (CN) Label
- Product Formulation Statement



Yogurt

Some have higher sugar content than others

Must contain no more than 23 grams of total sugars per 6 oz.

Applies to all age groups



Nutrition Facts

Serving Size 6 oz (170g) Servings Per Container 1

Amount Per Serving	
Calories 140	
	% Daily Value
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Potassium 0mg	0%

	- 70
Total Carbohydrate 22g	7%
Dietary Fiber 1g	4%

Sugars 19g

Sodlum 65mg

Protein 14g 28%

*Percent Daily Values are based on a 2,000 calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.

	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2400mg	2400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

Nutrition Facts Label

Serving Size

3%

- Number of servings in a package
- Unit: ounces, cups, per container, etc.

- Sugars or Total Sugars
 - Amount per serving
 - Means the same thing

Youurt Method

Yogurt Sugar Limits Serving Size Serving Size Sugar Limit (Ounces) (Grams) 64 grams 0-9 grams 2.25 ounces 0-13 grams 99 grams 3.5 ounces 0-15 grams 113 grams 4 ounces 0-20 grams 5.3 ounces 150 grams 0-23 grams 170 grams 6 ounces 0-31 grams 227 grams 8 ounces



Table Method Steps

- Step 1: Find the Serving Size, in ounces (oz) or grams (g): 6 oz
- Step 2: Find the amount for Sugars: 19 grams
- Step 3: Find the serving size in the Sugar Limits Table

Nutrition Facts

Serving Size 6 oz (170g) Servings Per Container 1

Protein 14g

Amount Per Serving	
Calories 140	
	% Daily Value
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Potassium 0mg	0%
Sodium 65mg	3%
Total Carbohydrate 22g	7%
Dietary Fiber 1g	4%
Sugars 19g	
The state of the s	

*Percent Daily Values are based on a 2,000 calorie diet. Your Daily

28%

values may be night	Calories	2.000	2,500	
Total Fat	Less than	65g	80g	
Sat Fat	Less than	20g	25g	
Cholesterol	Less than	300mg	300mg	
Sodium	Less than	2400mg	2400mg	
Total Carbohydrate		300g	375g	
Dietary Fiber		25g	30g	

Yogurt Sugar Limits				
Serving Size (Ounces)	Serving Size (Grams)	Sugar Limit		
2.25 ounces	64 grams	0-9 grams		

8 ounces

0-13 grams 3.5 ounces 0-15 grams 4 ounces 5.3 ounces 0-20 grams 6 ounces 0-23 grams

0-31 grams

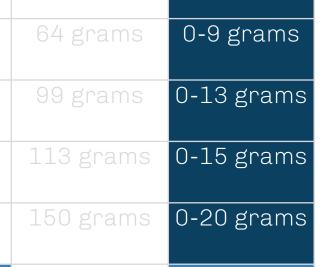
Table Method Steps (Cont)

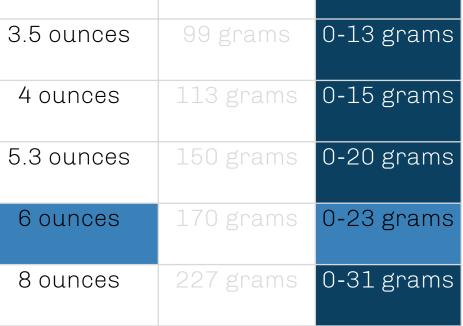
Step 4: Look at the number to the right of the serving size, under the "Sugar Limit" column Serving size: 6

OZ

Total sugars: 19 grams

Yogurt Sugar Limits Serving Size Sugar Limit (Ounces) 0-9 grams 2.25 ounces





Is it Creditable?

creditable -19 grams is between 0-23 sugar limit!

70gur i Sugar Limiis						
Serving Size (Ounces)	Serving Size (Grams)	Sugar Limit	Serving	Size	in	Grams

99 grams

113 grams

150 grams

170 grams

227 grams

4 ounces

Voquet Char Limite

64 grams 0-9 grams

0-13 grams

0-15 grams

0-20 grams

0-23 grams

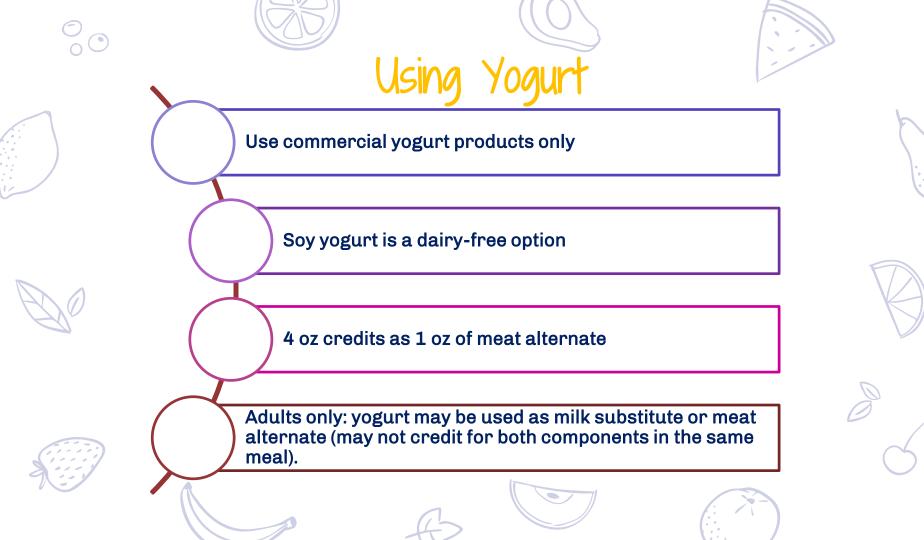
0-31 grams

Serving size:

1 container (170g)

Sugars:

19 grams



Non-Creditable Yogurt Products

Frozen yogurt

Drinkable yogurt

Homemade yogurt

Yogurt flavored products

Yogurt bars

Yogurt covered fruits & nuts

Yogurt in commercially prepared smoothies



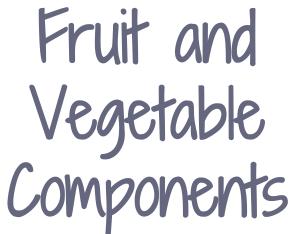






































Separation of Vegetable & Fruit

» Breakfast: 1 food component



Lunch & Supper: 2 food components



Snack: Optional

2 food components

























- Lunch & Supper: A vegetable may be used to meet the entire fruit component
- Must be at least the same serving size as the fruit component it replaced
- Cannot serve two fruits

























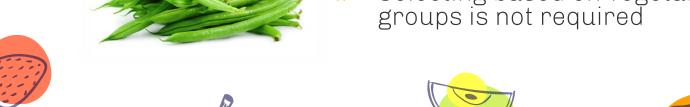




e.g., two servings of carrots would not credit, but corn and green beans would



Selecting based on vegetable sub-groups is not required







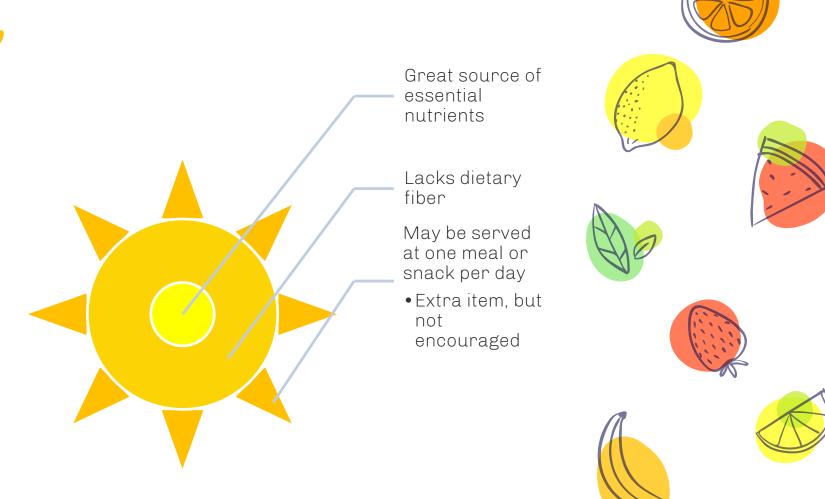


Juice Blends & Purees

- Credit as a fruit component or a vegetable component
- Contributes to the food component with the highest ingredient
 - Fruit component: if it has more fruits than vegetables
 - Vegetable component: if it has more vegetables than fruits



Juice

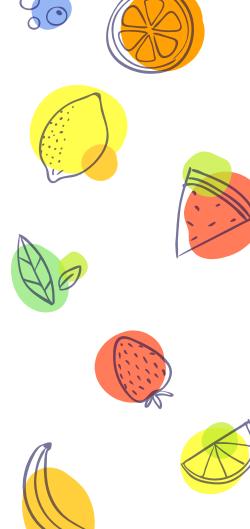


Juice + Different Groups

Served to only **1 group**

Morning Group AM Snack

> Afternoon Group PM Snack



Juice + Different Groups

Shift: 1:30 Serve to all participants at a Shift: 2:00 single meal or snack Shift: 2:30























Grain Component

















Grains Overview

At least 1 serving of grains per day must be whole grain-rich

Breakfast cereals must contain no more than 6 grams of sugar per dry oz

Grain-based desserts no longer credit toward the grain component

Use ounce equivalents (oz eq) to determine the amount of creditable grains starting October 1, 2019







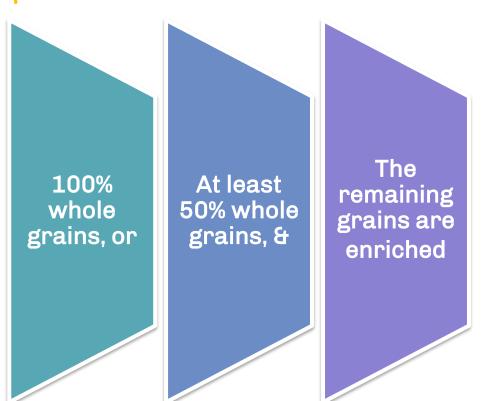


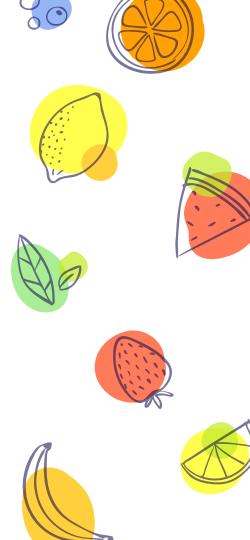






Whole Grain-Rich







Key Terms

Fortified:

additional

vitamins

minerals

are added

to product

and



Whole grains:

contain the bran, germ, & the endosperm

















the bran &

germ

Enriched grains:

nutrients are added back to the refined grain









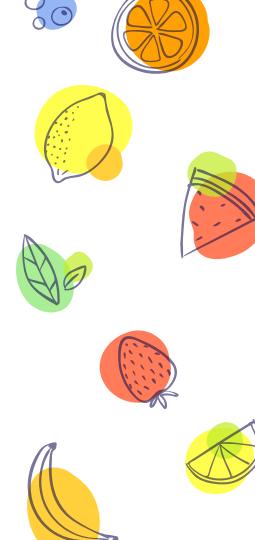


Whole Grain-Rich Foods at Meals & Snacks

Each day, at least one meal or snack must include a whole grain-rich food

Option to choose between meal or snack being offered that day

Exception: If serving **snacks only**, no whole grain-rich food is required, unless a grain is served



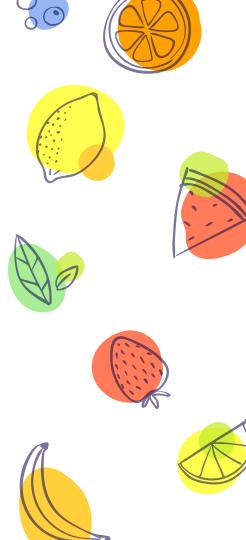
Documentation & Whole Grain-Rich Foods

Document whole grain-rich foods on menu

"Whole wheat" bread

"Whole grain-rich" English muffins

English muffins "whole grain-rich"

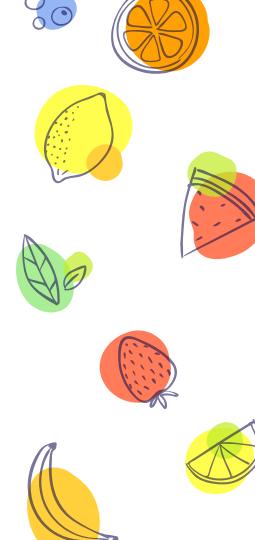


Reviews & Whole Grain-Rich Foods

When a whole grain-rich food is not served:

- The meal or snack containing a grain with the lowest reimbursement will be disallowed
- i.e., no whole grain-rich food was served for breakfast, lunch, or snack, the snack would be disallowed

Review menus, labels, & product information



Determining Whole Grain-Rich Products Methods

WIC-Approved Whole Grain Food

abeled as "Whole Wheat" and has a FDA Standard of Identity

FDA Whole Grain Health Claim

Meets the FNS Rule of Three

Meets the Whole Grain-rich criteria for the NSLP

Proper documentation from a manufacturer or a standardized recipe













Use WIC-Approved Grains Food List

Special
Supplemental
Nutrition
Program for
Women,
Infants, and
Children
(WIC) food
lists

Choose whole grains from ANY State's WIC Approved list

















FDA Standard of Identity

Whole wheat breads and pastas, only

Contains specific grain ingredients to be labeled as "whole wheat"

Must list the exact product name







Products Without a Standard of Identify

May not be used on products without a Standard of Identity

E.g, crackers, tortillas, bagels, and biscuits Watch for tricky wording

"whole grain"

"made with whole grains"

"made with whole wheat"

"contains whole grains"

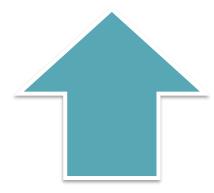


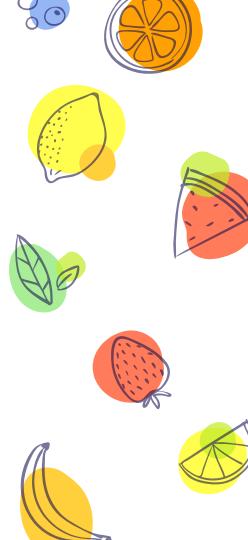
Whole Grain Health Claim



"Diets rich in whole grain foods & other plant foods, & low in saturated fat & cholesterol, may help reduce the risk of heart disease."

"Diets rich in whole grain foods & other plant foods & low in total fat, saturated fat, & cholesterol may reduce the risk of heart disease & some cancers."





Rule of Three

1st Ingredient is a whole grain

2nd

Whole Grain Rich

3rd

GRAIN Ingredient is a whole grain, enriched grain, bran, or germ

GRAIN Ingredient is a whole grain, enriched grain, bran, or germ















INGREDIENTS:

WHOLE WHEAT FLOUR, WATER, ENRICHED WHEAT FLOUR, WHEAT STARCH, YEAST, SUGAR, AND SALT

Yes, It is whole grain-rich

























Corn Chips

























Mixed Dishes

CHEESE PIZZA CRUST

INGREDIENTS: MOZZARELLA CHEESE, PARMESAN CHEESE, WHITE WHOLE WHEAT FLOUR, BROWN RICE FLOUR, ENRICHED FLOUR, NON-FAT MILK, WATER, TOMATO PASTE. YEAST First GRAIN Ingredient is a whole grain

Second GRAIN

Ingredient is a whole grain, enriched grain, bran, or germ

Third GRAIN

Ingredient is a whole grain, enriched grain, bran, or germ











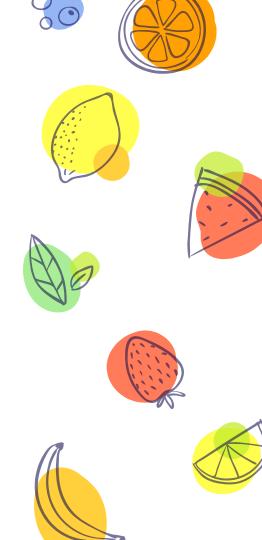




Whole Grain-Rich Cereal

WHOLE GRAIN-RICH First Grain Ingredient is a whole grain

Cereal is fortified

























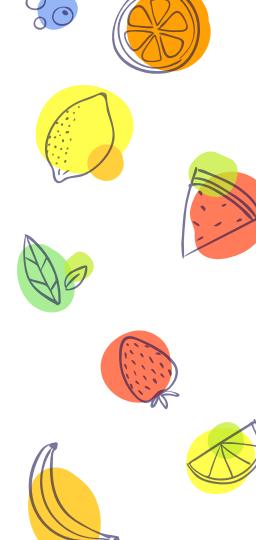


Breakfast Cereals

Source of added sugar

Types: Ready-to-eat, instant, & regular hot cereal

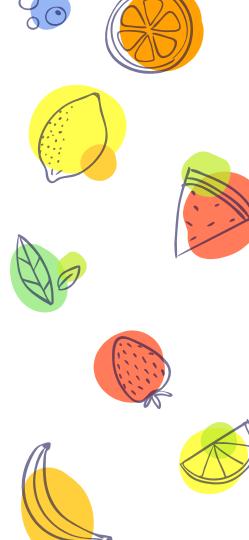
Must contain no more than 6 grams of total sugar per dry oz.



Selecting Creditable Breakfast Cereal Methods

WIC-Approved Breakfast Cereals List
Table Method





Use ANY WIC Approved Breakfast Cereal Lists

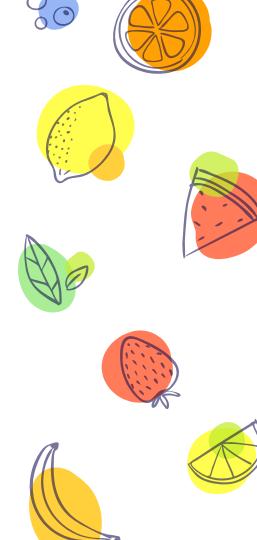
- Meets the sugar limits for the CACFP
- All WIC approved breakfast cereals contains no more than 6 grams of sugar per dry oz

www.fns.usda.gov/wic/wic-contacts

Table Method: Breakfast Cereals

Nutrition Facts Serving Size 3/4 cup (30g) Servings Per Container 15		
Calories from Fat 5		
% Daily Value*		
1%		
0%		
-		
0%		
6%		
2g 7%		
12%		
280%		

Breakfast Cereal Sugar Limits	
Serving Size	Sugar Limit
If the serving size is:	Sugars cannot be more than:
0-2 grams	0 grams
3–7 grams	1 gram
8–11 grams	2 grams
12–16 grams	3 grams
17–21 grams	4 grams
22-25 grams	5 grams
26–30 grams	6 grams
31-35 grams	7 grams

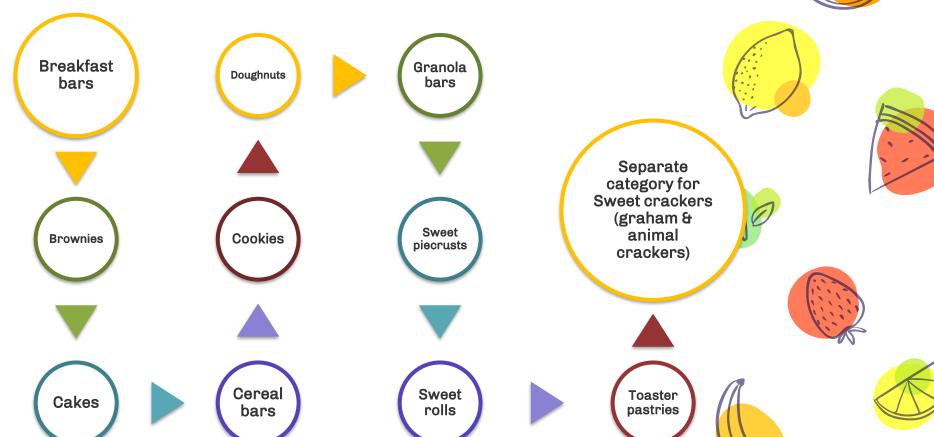


Grain-Based Desserts



List of SOME Grain-Based Desserts



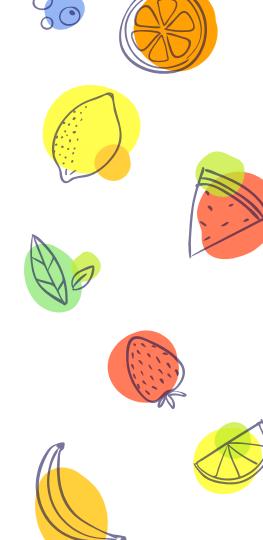


Grain-Based Desserts cont.

Some foods are not easily identified as grain-based dessert

i.e., a cookie is labeled "breakfast round" Ask the question:

Is this food thought of as a dessert?



Grain-Based Desserts Special Occasions

- Annual festival,
 birthday celebrations,
 end-of-year bash, or
 other special events
- May be served as an additional item only

















Other Meal Service Items















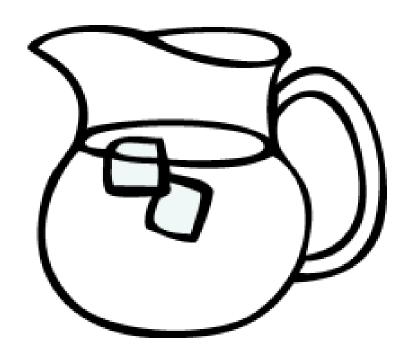


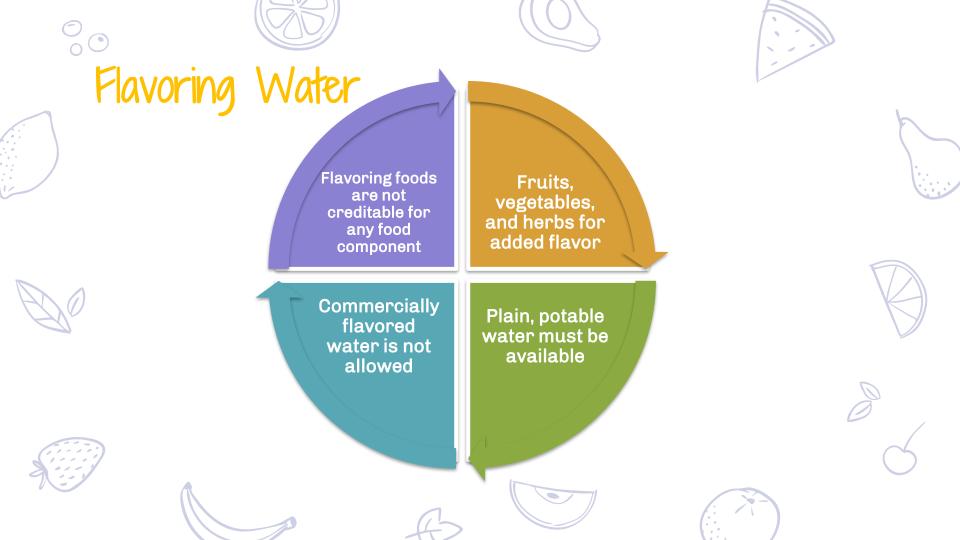
Water

Must be offered and made available throughout the day

May be offered alongside milk at meals or at snack

May not be served in place of milk





Deep-Fat Frying

May not be used to prepare meals on-site

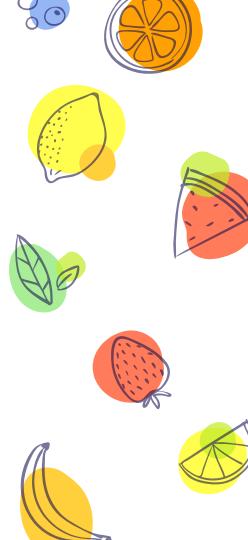
• Includes central and satellite kitchens

Defined as food submerged in hot oil or other fat

May purchase from commercial manufacturer

- Pre-fried
- Flash-fried
- Par-fried
- Deep-fat fried

May not deep-fry when reheating



Choose Healthier Methods

Deep-fat fried foods

- Strongly discouraged
- High in calories and solid fat
- Can negatively influence eating habits
- Increases the risk of chronic illnesses later in life

Consider the nutritional value of a food and how it contributes to healthy eating habits

















Adults Meal Pattern: Meal Service within CACFP

















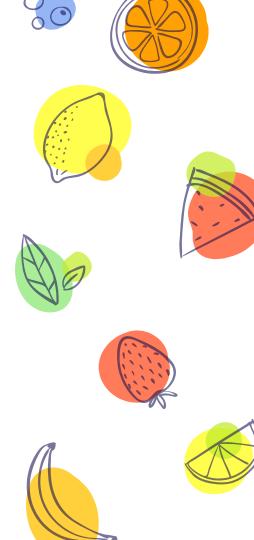


Types of Meal Services in the CACFP

Meal service impacts what participants eat

Meal service types:

- Pre-plated meals
- Family Style
- Offer Versus Serve (OVS)

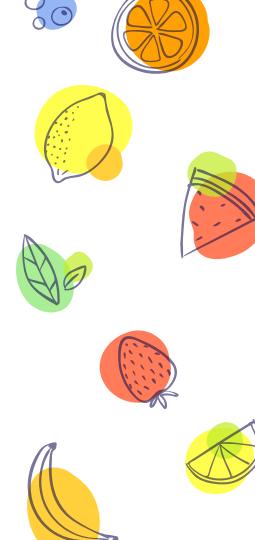


Family Style Meal Service

Promotes social, emotional, & motor skills

Encourages children to try new foods

Provides control over eating for children & adults



FSMS Guidelines

at each table to provide the

• Children, adults, & supervising adults (optional)







 Minimum serving size is 1/2 cup for sliced apples



• Includes 1/2 cup for supervising adult





Example: 3 adults & 1 supervising adult

Family Style Meal Service: Juice & Milk

Optional for participants to serve themselves juice or milk

Supervising adults must serve the required minimum serving size



FSMS: Serving Sizes

Participants may take smaller portions



If the food is refused, do not force

 Meals are reimbursable as long as all food components are offered









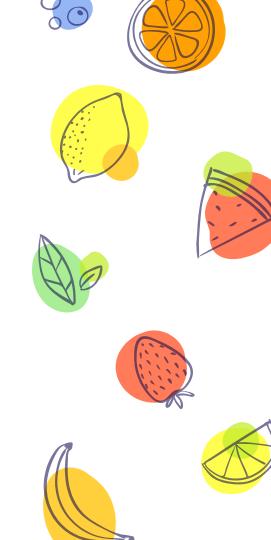




Supervising Adults & FSMS

Supervising adult meals are not reimbursable

Cost of adult meals are an allowable expense



Offer Versus Serve (OVS)

Adult day care facilities only

Not appropriate for young children

 Need time to explore flavors, textures, etc.

















Operators may serve food preportioned or directly

Participants may decline one or two of the food components or items

May not be used for snacks























Combination food: contains more than one food item from different food components that cannot be separated







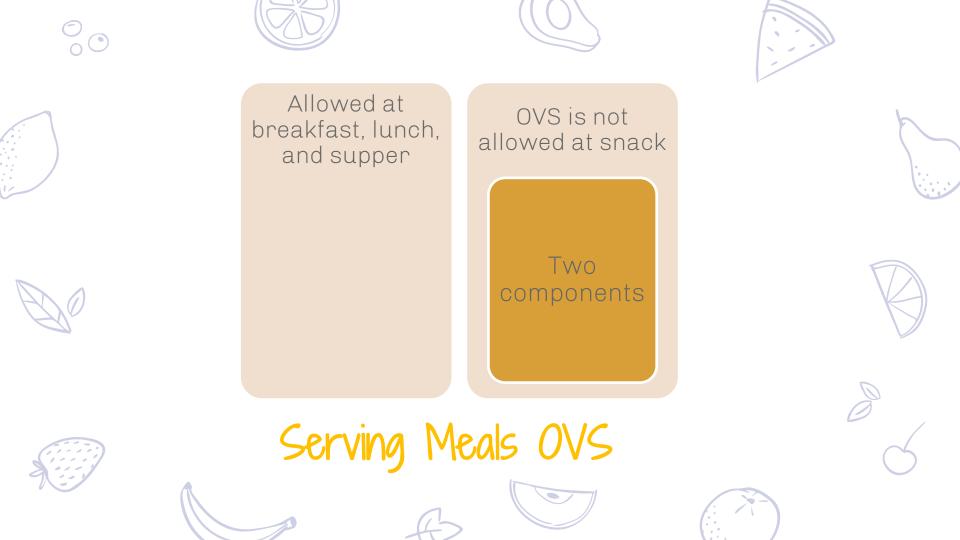












OVS at Breakfast

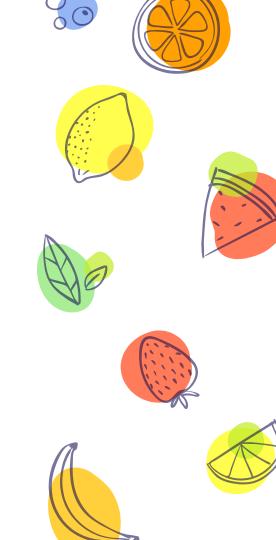
Offer four different food items, in the minimum serving sizes

Milk

Vegetable and fruit

Grain

One food item
from the
meat/meat
alternate
component or one
additional item
from the fruit and
vegetable
component or
grains component



Reimbursable OVS Breakfast

Participants must take at least three different food items

Sample option

½ cup bananas

½ cup strawberries 1 serving whole grain pancakes

1 cup (8 oz) of fluid milk















OVS at Lunch & Supper

Offer at least one food item from each of the five food components













Reimbursable OVS Lunch or Supper

Participants must take at least three food components

Sample option



½ cup fruit salad,

¼ cup broccoli,

1 cup pasta, and 1 cup (8 oz) of fluid milk

















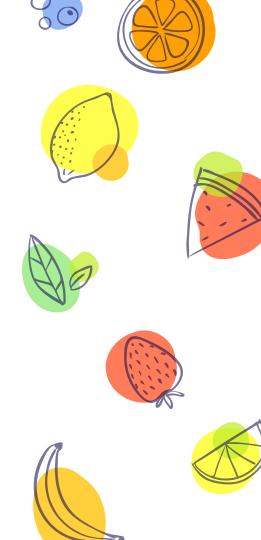
Reward & Punishment



Rewards may lead to cavities & weight gain

Punishment may cause overeating

Not allowed in CACFP facilities

















Adults Meal Pattern: Claiming Meals

















Claiming Meals: Basic Meal Service Requirements

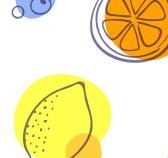
Follow the CACFP Meal Pattern

Dietary Prescription Form, if necessary

Take point-of-service meal counts

Maintain Menus & cost documentation

Maintain CN Labels and/or Meal Production Records













- ✓ Details information about the participant's disability
- ✓ Lists alternate food items
- Prescribed and signed by a State recognized medical authority







Attachment 3

MEDICAL STATEMENT TO REQUEST SPECIAL MEALS AND/OR ACCOMMODITY

School Agency Name	2	Site Name	
	-	Site rearrie	3. Site Telephone Num
4. Name of Participant			
			5. Age or Date of Birth
Name of Parent or Guardian			Section Sittle
L			7. Telephone Number
8. Check One:			
Participant does not have intolerance(s) or other n and agencies participate requests. A licensed phenomenate the second participant does not have that meets the nutrient st not an appropriate use of encouraged to accommo	re a disability, but is reque nedical reasons. Food pre ng in federal nutrition prog sysician, physician's asia e a disability, but is reques tandards for non-dairy ben this form. Schools and a date reasonable requests	any adaptive equipmentsting a special meal efferences are not an argams are encourage sistant, or nurse presting a special according to the special according as a special according as a special according to the special according as a special according a special according a special according as a special according as a special according a special according as a special according a special according according a special according a special according according a special according according a special accord	ial meal or accommodation. (Refer to cipating in federal nutrition programs nent. A licensed physician must si- or accommodation due to food appropriate use of this form. Schools d to accommodate reasonable accommodate reasonable accommodate reasonable accitioner must sign this form. amodation for a fluid milk substitute lik substitutes. Food preferences are in federal nutrition programs are ian, physician's assistant, nurse
 Disability or medical condition r 	addining a special meal or acc	commodation:	
Disability or medical condition of Participant has a disability, pn By participant has a disability, pn By participant has a disability, pn By participant has a disability, pn	ovide a brief description of pa	commodation: rticipant's major life act	ivity affected by the disability:
Disability or medical condition of Participant has a disability, pn By participant has a disability, pn By participant has a disability, pn By participant has a disability, pn	ovide a brief description of pa	commodation: rticipant's major life act	ivity affected by the disability:
Disability or medical condition r if participant has a disability, pr if participant has a disability, pr if participant has a disability, pr if participant has a disability pr if particip	ovide a brief description of pa nodation: (please describe in a official (please list specific for needed)	commodation: rticipant's major life act	ivity affected by the disability:
Disability or medical condition of Participant has a disability, pn By participant has a disability, pn By participant has a disability, pn By participant has a disability, pn	ovide a brief description of pa nodation: (please describe in a official (please list specific for needed)	commodation: rticipant's major life act detail to ensure proper is ods to be omitted and a	ivity affected by the
Disability or medical condition r if participant has a disability, pr if participant has a disability, pr if participant has a disability, pr if participant has a disability pr if particip	ovide a brief description of pa nodation: (please describe in a official (please list specific for needed)	commodation: rticipant's major life act detail to ensure proper is ods to be omitted and a	ivity affected by the disability: Implementation-use extra pages as needed, upgested substitutions, you may attach a
Disability or medical condition r if participant has a disability, pr if participant has a disability, pr if participant has a disability, pr if participant has a disability pr if particip	ovide a brief description of pa nodation: (please describe in a official (please list specific for needed)	commodation: rticipant's major life act detail to ensure proper is ods to be omitted and a	ivity affected by the disability: Implementation-use extra pages as needed, upgested substitutions, you may attach a
Disability or medical condition r principant has a disability, pn if participant has a disability, pn if participant has a disability, pn if principal participant in	ovide a brief description of pa nodation: (please describe in a official (please list specific for needed)	commodation: rticipant's major life act detail to ensure proper is ods to be omitted and a	ivity affected by the disability: Implementation-use extra pages as needed, upgested substitutions, you may attach a
9. Disability or medical condition r 10. If participant has a disability, pn 11. Dist prescription and/or accome 12. Foods to be omitted and substitute A. Foods To Be A. Foods To Be Indicate texture: Regular	ovide a brief description of pa ovide a brief description of pa nodeflor: (please describe in it ritions: (please list specific for needed)	onemodation: riscipant's major life act detail to ansure proper is odd to be omitted and a 8. 5	ivity affected by the disability: Implementation-use extra pages as needed, upgested substitutions, you may attach a
Disability or medical condition r principant has a disability, pn if participant has a disability, pn if participant has a disability, pn if processor in the processor in t	ovide a brief description of pa nodation: (please describe in a official (please list specific for needed)	commodation: rticipant's major life act detail to ensure proper is ods to be omitted and a	ivity affected by the disability: Implementation-use extra pages as needed, upgested substitutions, you may attach a
Disability or medical condition n if participant has a disability, pn if participant has a disability, pn if participant has a disability, pn if point prescription and/or accome if point prescription and/or accome	ovide a brief description of pa rodation: (please description of pa rodation: (please describe in it ritions: (please fist apecific fo need of Chopped	onemodation: riscipant's major life act detail to ansure proper is odd to be omitted and a 8. 5	reity affected by the disability: mplementation-use extra pages as needed upgested substitutions, you may attach a suggested Substitutions
9. Disability or medical condition r 10. If participant has a disability, pn 11. Dist prescription and/or accome 12. Foods to be omitted and substitute A. Foods To Be A. Foods To Be Indicate texture: Regular	ovide a brief description of pa ovide a brief description of pa nodeflor: (please describe in it ritions: (please list specific for needed)	onemodation: riscipant's major life act detail to ansure proper is odd to be omitted and a 8. 5	ivity affected by the disability: Implementation-use extra pages as needed, upgrested substitutions, you may attach a Suggested Substitutions I Pureed
Disability or medical condition in participant has a disability, pn 10. If participant has a disability, pn 11. Dist prescription and/or accome 2. Foods to be omitted and substitutional and administration as a series of the product of the pr	ovide a brief description of pa rodation: (please description of pa rodation: (please describe in it ritions: (please fist apecific fo need of Chopped	onemodation: riscipant's major life act detail to ansure proper is odd to be omitted and a 8. 5	reity affected by the disability: mplementation-use extra pages as needed upgested substitutions, you may attach a suggested Substitutions
Disability or medical condition n if participant has a disability, pn if participant has a disability, pn if participant has a disability, pn if point prescription and/or accome if point prescription and/or accome	ovide a brief description of pa rodation: (please description of pa rodation: (please describe in it ritions: (please fist apecific fo need of Chopped	onemodation: riscipant's major life act detail to ansure proper is odd to be omitted and a 8. 5	ivity affected by the disability: Implementation-use extra pages as needed, upgrested substitutions, you may attach a Suggested Substitutions I Pureed

Physician's signature is required for participants with a disability. For participants without a disability, a Ecensed physician's assistant, or nurse practitioner must sign the form. Parentlegal guardian signature is acceptable for fluid milk substitution for a child with special medical or dietary needs other than a disability.

Special Dietary Prescription Form

- Review it carefully
- Request additional information, if necessary
- Policy Memo: CACFP 14-2017 Modifications to Accommodate Disabilities in the Child and Adult Care Food Program and Summer Food Service Program



Point of Service Meal Counts

Meal Count Systems:



- Meal counts taken on individual basis
- Used if approved to serve 4 or more meals/day



 Used if approved to serve 3 meals or less/day



• Use of point of sale system for counting

















Point of Service Meal Counts

Meals served to "program adults" working in the program, non-program adults, and other non-enrolled persons must also be recorded*

 Note: these meals may not be included in the CACFP meal counts for reimbursement, but can be used for cost documentation











Point of Service Meal Counts

Unacceptable Meal Counting Methods

- Counts based on number of trays or plates available and left over after meal service
- Counts based on the number of vended meals received
- Counts taken at the beginning of serving line without checking to see if the meals served were creditable
- Claiming the same number of meals every day, referred to as "block claiming"
- Counts based on the number of children in attendance
- Counts based on previous meal counts
- Counts based on the number of tickets distributed
- Counts based on the number of meals prepared



























Adults Meal Pattern: Recordkeeping





































- Month, day, year
- Food items served in each meal type, noting milk fat content and juice type
- Substitutions
- Serving Sizes*

















Weekly Cycle Menu Example





6/24/19-	Monday	Tuesday	Wednesday	Thursday	Friday
6/28/19		BREAKF	AST		
Milk	1% or Fat-free Milk	1% or Fat-free Milk	1% or Fat-free Milk	1% or Fat-free Milk	1% or Fat-free Milk
Fruits/Vegetables	Mixed Fruit	Mandarin Oranges ✓	Baked Apples ✓	Kiwi ✓	Honeydew Melon
Grains/Breads	Johnny Applesauce Pancakes	Wheat Chex® ✓	Whole Grain Toast	Oatmeal	Whole Grain English Muffin
		LUNC	H		
Milk	1% or Fat-free Milk	1% or Fat-free Milk	1% or Fat-free Milk	1% or Fat-free Milk	1% or Fat-free Milk
Fruits/Vegetables	Bunny Sticks	Super Salmon	Green Giant Salad	Tasty Taquitos	Yellow Squash
Fruits/Vegetables	Pears	Peas	Grapes	Green Beans	Zucchini
Grains/Breads	Whole Grain Roll	Brown Rice	Cheesy Spaghetti Bake	Tasty Taquitos	Couscous
Meats/Meat Alternates	Baked Turkey Breast	Super Salmon	Cheesy Spaghetti Bake	Tasty Taquitos	Magic Most
		SNAC	K		
Milk	-	-	-	-	-
Fruits/Vegetables	Pineapple	Tangerines	Cucumber	Applesauce	Berry Banana Split
Grains/Breads	Mini Whole Grain Bagels	-	-	Whole Grain Crackers	-
Meats/Meat Alternates	-	Yogurt	Cheese Cubes	-	Berry Banana Split
Beverage	Water	Water	Water	Water	Water









Recordkeeping: Cost

Maintain receipts and/or documentation of:



Income to the program from all sources



All submitted reimbursement claims



All program payments received from VDH



All food costs, including milk receipts



Operating and administrative costs, including time records for employees performing CACFP-related tasks







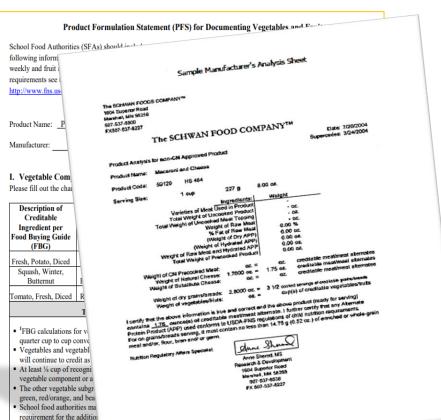






Manufacturer Analysis Sheet

Please note that raw leafy g





Meal Production Records

Macaroni and Cheese

from Meals without Squeals by Christine Berman, MPH, RD & Jack Fromer

Ingredients:

8 oz. dry macaroni or other pasta

2 cups low-fat milk.

1 1/2 tsp. cornstarch

3/4 tsp. salt

1/4 tsp. pepper

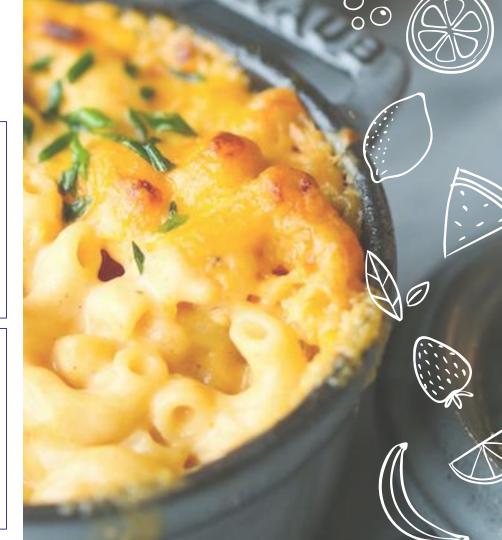
1/2 tsp. dry mustard

1/4 tsp. paprika

12 oz. sharp cheddar cheese, grated 2 scallions, green part only, thinly sliced (optional)

- 1. Cook macaroni. While macaroni is cooking, combine milk and dry ingredients in a jar and shake very well.
- 2. When macaroni is tender, drain it and return to pan.
- Add milk mixture and stir gently over medium heat until sauce thickens.
 Add cheese and optional scallions or chives, stir until melted, and serve.

Sample Recipe Analysis		Meal Components in this recipe	
COMPONENT elbow macaroni	sharp cheddar cheese	YIELD:	
AMOUNT 8 oz. (dry)	12 oz.	3-5 year olds: 8 servings; each serving = 1 meat alternate and	
MEAT AND MEAT ALTERNATE	8 (1-1/2 oz. servings) or 6 (2 oz. servings)	2 grains/breads	
VEGETABLE/FRUIT none	none	6 and older: 6 servings; each serving = 1 meat alternate and 1.5 grains/breads	
GRAINS/BREADS 19" (1/4 c. servir or 9 (1/2 c. servir *Food Buying Guide			



Questions? Contact Us!



CACFP@VDH.Virginia.Gov



(877) 618- 7282

Virginia Department of Health Division of Community Nutrition Special Nutrition Programs 109 Governors Street, 8th Floor Richmond, Virginia 23219



